

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket N .		1382-TC-393-DIV	
		First Named Inventor		NAMIE, Tsutomu	
		Title	HYDRAULIC TYPE PLASTIC TENSIONER		
		Express Mail Label No.	ev 301974341 US	Date Mailed: 11/18/03	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Commissioner of Patents Mail Stop Patent Application Alexandria, VA 22313-1450	
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1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27 3. <input checked="" type="checkbox"/> Specification (Total Pages [16]) (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) (Total Sheets [8]) 5. <input checked="" type="checkbox"/> Oath or Declaration (Total Pages [1]) a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and certification for non-publication under 35 U.S.C. 122 17. <input type="checkbox"/> Other: _____	

CONTINUING APPLICATION INFORMATION

This application is a **Divisional** of the following United States application which is incorporated herein by reference:

10/103,902, filed on March 22, 2002.

PRIORITY APPLICATIONS

This application claims priority to the following application(s), each of which is hereby incorporated herein by reference.

Foreign Applications: JAPAN application no. 2001-090517 filed March 27, 2001.

CORRESPONDENCE ADDRESS

Please address all correspondence to **Customer Number 000110** to the attention of the individual identified below.

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16310 U.S. PTO

FEE TRANSMITTAL*Complete if known*

Application Number: Not Assigned

Filing Date: Concurrently Herewith

First Named Inventor: NAMIE

Group Art Unit:

Examiner Name:

Total Amt. of Payment: (1)+(2)+(3)= \$770

Attorney Docket Number: 1382-TC-393-DIV

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to:

☐ Charge indicated fees☒ Charge additional fees☒ Credit overpayments

to the account of DANN, DORFMAN, HERRELL & SKILLMAN

Deposit Account Number 04-1406

2. Payment enclosed:

Check in the amount of \$770**FEE CALCULATION****1. FILING FEE****Fee Description**

Utility filing fee

770

Design filing fee

0

Plant filing fee

0

Reissue filing fee

SUBTOTAL (1) \$770**FEE CALCULATION (continued)****ADDITIONAL FEES****Fee Description****Fee Paid**

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Extension for response within first month

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0Other fee (specify) Advance Order (10 copies)**SUBTOTAL (3)** \$0

2.

		Paid	Extr	Fee
Total Claims	7	-20	= 0	x 18 = 0
Independent Claims	1	-3	= 0	x 84 = 0

Multiple Dependent
(First presentation)**SUBTOTAL (2)** \$0

Submitted By:

Typed or

Printed Name Henry H. SkillmanReg. Number 17,352

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Henry H. SkillmanDate 11/18/0304-1406